CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	iulde explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Mr. John	MI T	OFFICE USE ONLY
NAME			Date Received
	NICKNAME LAST	SUFFIX	Abilene City Secretary
	Jack Rentz		
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #; C	STATE; ZIP CODE	APR - 5 2013
OFFICEHOLDER MAILING	18 Pinehurst		
ADDRESS	Abilene, TX 79606		Filed for Record
Change of Address			
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER	EXTENSION	Cot- Mand dellowed as Data Destruction
PHONE	(325) 794-5601		Date Hand-de vered or Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$
TREASURER NAME	Mrs. Elyse		Date Processed
28	NICKNAME LAST	SUFFIX	Date Imaged
	McAnally Lev	vis	Data imagas
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	NTE #; CITY; STATE	ZIP CODE
ADDRESS	2002 Cedar Crest Dr.		
(Residence or Business)	Abilene, TX 79601		
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER PHONE	(325) 660-6901		
9 REPORT TYPE	January 15 💢 30th day before ele	ection Runoff	15th day after campaign
		- Vanen	treasurer appointment (Officeholder Only)
	July 15 8th day before elec	tion Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	Month	Day Year
	01/01/2018	THROUGH 03 /	26 / 2018
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary	Runolf Other Description	
	05 / 05 / 2018 X General	Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		41.11 01. 0	d pl
		Abilene City Cour	ncil Place 2
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	John J	- Rentz	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages		<u> 2250</u>	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	R .	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THE S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	** W
	l	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 44,700.00
EXPENDITURE TOTALS		OLITICAL EXPENDITURES OF \$100 OR LESS,	\$ 88.30
	4. TOTAL	POLITICAL EXPENDITURES	\$ 33,725.63
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T BY OF THE REPORTING PERIOD	* O
18 AFFIDAVIT			
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Notary Public, State of Texas NOTARY ID \$ 1218230-9 Ny Commission Exp 12-27-20 Signature of Candidate or Officeholder			
AFFIX NOTARY STAMP/SEALABOVE			
Sworn to and subscribed before me, by the said John J. Rentz, this the 5th			
day of April , 20_18 , to certify which, witness my hand and seal of office.			
Welen England Helen England Notary			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME John J. Rentz	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 44,700.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CO	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. SCHEDULE E: LOANS	\$ 0
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM	M POLITICAL CONTRIBUTIONS \$33,637.33
6 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE F	ROM POLITICAL CONTRIBUTIONS \$ 0
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CAR	\$ 0
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM	PERSONAL FUNDS \$ 0
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONT	RIBUTIONS TO A BUSINESS OF C/OH \$ 0
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FRO	OM POLITICAL CONTRIBUTIONS \$ 0
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, A	AND CONTRIBUTIONS \$ 0

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) John. J. Rentz 7 Amount of contribution (\$) 1/4/2018 6 Contributor address; City: State; Zip Code \$1,000.00 4620 North 18 St. Abilene, Tx 79603 | 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:_____) Date Amount of contribution (\$) Bruce + Nancy Hildebrand Contributor address; City; State; Zip Code \$ 250.00 19 Mesa Ridge Abilene, TX 79606 Employer (See Instructions) Full name of contributor Date Out-of-state PAC (ID#:____ Amount of contribution (\$) Glen and Marelyn Shedd Contributor address; City; State; Zip Code 6441 Bay Hill Dr. Abilene, Tx 79606 Principal occupation / Job title (See Instructions) Employer (See Inst \$ 500.00 Date out-of-state PAC (ID#: Amount of contribution (\$) 1/4/2018 Scott Dieser. Contributor address; City; State; Zip Code \$ 1,000.00 PO Box 701 Abilene, TX 79604 (Inhabitations) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBU	JTIONS SCHEDULE A1
The instruction Guide explains how to complete this for	n. 1 Total pages Schedule At: 47
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 5 Fult name of contributor Out-of-state PAC (ID#)	
TAMEOR & LOGAN STURE 6 Contributor address: City: State: Z 2018 1310 61 cm wood Abortons	TY 7960 \$ \$50.00
8 Principal occupation / Job title (See Instructions) 9	Employer (See Instructions)
Date Full name of contributor ☐ out-of-state_PAC (ID#:	Automit of contribution (3)
1/9/ BRINN & SONSA BESSEN Contributor address: City: State; 2 2018 1834 ELIN WUDI) Ala Leve	ip Code
= 1 1/4	Employer (See Instructions)
Pond YVDNNE BATTS Contributor address; City: State: Z 2018 CP UTU MANAGET Principal occupation / Job title (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#) Ja/ SUITT + MICH ELE SE Contributor address; City; State; Zi 3HO CUPPY LANE TIES Principal occupation / Job title (See Instructions)	JT672 \$760 (1)
ATTACH ADDITIONAL COPIES OF THI If contributor is out-of-state PAC, please see instruction	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Full name of contributor KRL + KRISTI THAXTON 6 Contributor address: City: State: Zip Code 3 St. Andrews Alman TX 79600 9 Employer (See Instructions) 7 Amount of contribution (\$) \$250.00 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Out-of-state PAC (ID#:____ Amount of contribution (\$) DAVID & TERESA VILLAM & Contributor address: City; State; Zip Code 609 Prospanty Abiline, TX 79602 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID# Date Amount of contribution (\$) WD & ULA SENTER Contributor address; City, State, Zip Code to 1 Coppy LANG Maley, TX 79606 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1 The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#: Date Amount of contribution (\$) MPHMPS JOKEPH DIVIN CANON COntributor address; City; State; Zip Code 102TI QUE WOOD AMILM, TX 79605 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#:___ Amount of contribution (\$) ROUT LORILE BUTLER Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor	7 Amount of contribution (\$)
19/2018 JIM + MAREPLY SON YDER 6 Contributor address: City: State: Zip Code 14 Zu Gword Abilere TX 79405	#500.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	structions)
Date Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
19/2018 UFLODY HVNT Contributor address: City: State: Zip Code 12+11 Sylvan Abiline TX 79605	#250.00
Principal occupation / Job title (See Instructions) Employer (See Ins	tructions)
Pate Full name of contributor out-of-state PAC (ID#	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Pate Full name of contributor out-of-state PAC (ID# BY LLYE PROCTOR SHAW) Contributor address; City; State; Zip Code 7018 1160 Aver Daks Dilly Tx 7968	Amount of contribution (\$) # 250, 0
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ructions)
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
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8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct	ions)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	ons)
Date Full name of contributor July TIMOTHY AD COCK Contributor address; City; State; Zip Code TMUSA RAGE AD I W TX 7960 O Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$) \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\
Date Full name of contributor Out-of-state PAG (ID#	Amount of contribution (\$) 4500, W
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
Date 5 Full name of contributor out-of-state PAC (IDN: 19/19/2018 5 Full name of contributor out-of-state PAC (IDN: 19/19/2018 5 Full name of contributor of contrib	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ions)
Date Full name of contributor out-of-state PAC (ID#) Wath Author Out-of-state PAC (ID#) Wath Author Out-of-state PAC (ID#) Wath Author Out-of-state PAC (ID#)	
Principal occupation / Job title (See Instructions) Employer (See Instruct	ions)
Date Full name of contributor out-of-state PAC (ID#	Amount of contribution (\$) ### (100 . 00)
Date Full name of contributor Out-of-state PAC (ID#	Amount of contribution (\$) ### 100 . 00
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE If contributor is out-of-state PAC, please see instruction guide for additional r	

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (IDM: //9/ 6 Contributor address; City, State: Zip Code //20/ 1933 Hah and Make TX 19605	7 Amount of contribution (\$)
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct	ions)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	ians)
Date Full name of contributor out-of-state PAC (ID#	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructi	ons)
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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
1/19/2018 6 Contributor address; City; State; Zip Code	\$500.00
1427 Tanglewood Rd. Abileme, Tx 79605 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	N
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc	nons)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
Gien and (arol Hall Contributor address; City: State; Zip Code 79605 740 Sayles Dr. Abilenetx	\$ 100.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
N9/2018 Full name of contributor out-of-state PAC (ID#	\$ 100.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
Pate Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)
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MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
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2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDF:	7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	ions)
Date	Full name of contributor oul-ol-state PAC (ID#:) TOYING AND Elizabeth Rankin Contributor address; City; State; Zip Code	Amount of contribution (\$)
19/2018	Scontributor address; City; State; Zip Code 18Wynrush Cir Abilene Tx 79606	⁸ 100 .00
Principal occup	eation / Job title (See Instructions) Employer (See Instructions)	ions)
Principal occup	Full name of contributor out-of-state PAC (ID#:) GIOU BEITSCHEY Contributor address; City; State; Zip Code Abulene TX 19606 PAC (ID#:) Employer (See Instructions) Employer (See Instructions)	Amount of contribution (\$)
V19/2018	Full name of contributor RONGY AND Sherry Burchell Contributor address; City; State: Zip Code Rollen Abbeyst. Rollene, TX 19606	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	EDED
	If contributor is out-of-state PAC, please see instruction guide for additional r	reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) ☐ out-of-state PAC (ID# Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID# Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID#:_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#) Amount of contribution (\$) State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONET	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 122/2018 8 Principal occur	5 Full name of contributor out-of-state PAC (ID#: GUINN SMITH 6 Contributor address; City; State; Zip Code 2022 Brookhoven St. Abilene TX pation / Job title (See Instructions) 9 Employer (See Instructions)	7 Amount of contribution (\$) \$ 100.00
	Full name of contributor out-of-state PAC (IC#:) NOYMON E.C. Noil Sr. Contributor address; City; State; Zip Code 1738 Richland Dr. Abitene TX 19603 Pation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$) \$25.00
, , , , , , , , , , , , , , , , , , ,	Zimpioyer (see institutions)	wis,
1221 2018	Grand Suzan Shahan Contributor address; City; State: Zip Code 5217 Wyndham Ct. Hollene, Tx Take PAC (IDR:	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions) Employer (See Instruct	ions)
Date 1/22/2018	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions) Employer (See Instruct	ions)
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	If contributor is out-of-state PAC, please see instruction guide for additional	eporting requirements,

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions Employer (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) ut-of-state PAG (ID#: Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID#:_ Amount of contribution (\$) City; Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1 The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) Ken & Xelby Martin 6 Contributor address City: State; Zip Code 774 Rivercreet alben Tx 19605 8 Principal occupation / Job title (See Instructions) Out-of-state PAC (ID#:_ Date Amount of contribution (\$) 10000 abilers, Ly 19605 Out-of-state PAC (ID#:__ Date Amount of contribution (\$) Amount of contribution (\$) Date Out-of-state PAC (ID#: Fairway Oaks abole 2x 19606 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule At The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (5) Employer (See Instructions) _ Out-of-state PAC (ID#: Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (S) Date Amount of contribution (S) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (S) MARK & BECKY COLUMN 6 Contributor address: City: State: Zip Code 1,000 00 Full name of contributor ut-of-state PAC (ID#: Date Amount of contribution (\$) Date out-of-state PAC (ID#: Amount of contribution (\$) Date ut-of-state PAC (ID#:_ Amount of contribution (S) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (S) Dale Amount of contribution (S) 700 Date Amount of contribution (\$) Date Amount of contribution (\$) 1281 Cariterbury DR Celuler, 2x 79602 Man / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (S) Full name of contributor out-of-state PAC (ID#: Date Amount of contribution (\$) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) Full name of contributor Date Out-of-state PAC (ID4: Amount of contribution (\$) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) John. J. Rentz 4 Date 7 Amount of contribution (S) Full name of contributor Out-of-state PAC (ID#:_ Date Amount of contribution (\$) Full name of contributor Date Amount of contribution (S) Contributor Out-of-state PAC (IDA) Contributor address: City: State; Zip Code | 218 | ALBANY | ABILENE TX 79685 Date Amount of contribution (S)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule At: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) Full name of contributor unt-of-state PAC (ID#: Amount of contribution (\$) Date Full name of contributor Out-of-state PAC (IC#; Amount of contribution (S) Out-of-state PAC (ID#:_ Amount of contribution (\$) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

www.ethics.state.tx.us

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) \$500 00 8 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID# Date Amount of contribution (\$) 4000 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) ☐ out-of-state_PAC (ID#: Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) SHORELINE DR ABILITIE TX Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date Out-of-state PAC (ID# Amount of contribution (\$) Principal occupation / Job title (See Instructions Employer (See Instructions) Date Out-of-state PAC (ID#) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
1.24.18	GPEG & PATTY KNIGHT 6 Contributor address; City: State; Zip Code 2015 DKKWND KBIVENETR 19605	\$150m
8 Principal occu	pation / Job titla (See Instructions) 9 Employer (See Instruc	lions)
Date	Full name of contributor	Amount of contribution (\$)
12416	BOB WAVEVE FABUE Contributor address: City: State: Zip Code	\$500°
	1431 TANGUEW OUD ABOUTUET 179605	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor	Amount of contribution (\$)
1-24-18	PAYT 3 JAWE COX Contributor address: City: State: Zip Code 1473 WWDLAND TR ABJUNETZ PILO	410=
	14 13 WINDLAND IR HEIVENETZ FILED	5
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	lions)
Date	Full name of contributor aut-of-state PAC (IDs:	Amount of contribution (\$)
1-24.14	Contributor address; City; State; Zip Code	\$ 100 4
	1450 MANDEVILLA DR ABILENETZ	79606
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule At 47		
John. J. Rentz	3 Filer ID (Ethics Commission Filers)		
4 Date 5 Full name of contributor Dout-of-state PAC (IDA: Bob Hunter 6 Contributor address: City: State: Zip Code 12509N10M#120 Molent TX71401	7 Amount of contribution (\$)		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
12+ 18 Koyce Money Contributor address: City: State: Zip Gode 1709 S. Saddk Lakes Dr. Alakne TX 79102	# 00.00		
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (IDE:) HarkHoover and Judith Phane of Contributor address; City: State: Zip Code 2409 Christopher Dr. Air Hnc TX 19602	Amount of contribution (\$)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID# 124	Amount of contribution (\$)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	EDED		
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (S) 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID# Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID# Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1 The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Date 7 Amount of contribution (5) 8 Principal occupation / Job title (See Instructions) Out-of-state PAC (ID) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Out-of-state PAC (ID#: Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule At 47	
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)	
4 Date 1/29/18	5 Full name of contributor out-of-state PAC (IDF: Charlic Pigeon 6 Contributor address; City: State; Zip Code 1801 State Highway 36 Abilene, Ty 7960;		
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See In	structions)	
Date	Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)	
1/29/18	Luke Longhoffer Contributor address: 126 Periwinkle Trl Abilene, Tx 79602	160.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date 1/29/18	Full name of contributor out-of-state PAC D#: On a Becky Poindexter Contributor address: City; State; Zip Code 5424 Willow Wood Or Abi leng TX 79602	Amount of contribution (\$) 250.00	
		200.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	
1/29/18	Contributor address: City: State: Zip Code 32 Pepblebeach Abilene, Tx79606	60.00	
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	structions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1 47 The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 5 Full name of contributor 4 Date 7 Amount of contribution (\$) (0000 Abirena TX 79600 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID# Amount of contribution (\$) Paul & Coail Thames Contributor address; City; State; Zip Code 150.00 1217 Elmwood Dr. Abilene, Tx 79605 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:_ Amount of contribution (\$) 500.00 20 Winged FootCir. Abiliene, Tx7 9686 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Amount of contribution (\$) wayne malone Contributor address: State; Zip Code 1000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule At The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 500.00 Abilens, Tx79606 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#:_ Amount of contribution (\$) City; State, Zip Code 100.00 Abilenety 74605 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of contribution (\$) wayne Lanham City; State; Zip Code 300.00 Notenetly 79406 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1	
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47	
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of contribution (\$)	
1/29/18	Cary + Deonna Galbraith 6 Contributor address: City, State, Zip Code L19 Cypress Point Abilene 1 79606	100.00	
	L19 Cypress Point Abilene 1 179606	•	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			
Date	Full name of contributor	Amount of contribution (\$)	
1/29/18	Brandon Carr + Christik Curt 15 Carr Contributor address; City: State; Zip Code		
	1366 Mander Sl. Abilene, Tx 79602	100.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date	Full name of contributor	Amount of contribution (\$)	
1/24/18	Ronny Teresa Bryand Contributor address; City; State: Zip Code	250.00	
	2151 Oldham Ln Abilene, tx 79602	20000	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date	Full name of contributor out-of-state PAC (ID#:) Oarrell * Leich Ann Moure	Amount of contribution (\$)	
1/29/18	Contributor address; City: State; Zip Code 534 CRR7 TUSCOL, TX79562	200.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) John. J. Rentz 5 Full name of contributor Jack Ramsey 6 Contributor address: City: State: Zip (4 Date 7 Amount of contribution (\$) 1/29/18 250.00 City, State, Zip Code 2189 Oldham Ln Abileng Tx 74602 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date Out-of-state PAC (ID#:_ Amount of contribution (\$) Lori Owens 1/24/12 Contributor address; City; State; Zip Code 45 Muirfield 1000:00 Abilent, Tx 79606 Employer (See Instructions) Full name of contributor Date Out-of-state PAC (ID# Amount of contribution (\$) Nancy Brock Contributor address: 1/29/18 250.00 5 21e2 Luxndham Ct. Abilents 79606 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Amount of contribution (\$) Michael Jonia Dictenson Contributor address; City; State; Zip Code 100.00 Abilene, Tx 79606 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME John. J. Rentz 4 Date 5 Full name of contributor out-of-state PAC (IDH: 7 A 1/29/18 Pewayne Chitwood 6 Contributor address: City; State, Zip Code 95 Hedges Rd Abilene, Tx 79605 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 250,00 Date Full name of contributor Jeff Rogers Contributor address; City: State: Zip Gode 83175 addle Creek Rd. Abilene TX7916 DQ Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#:__ Amount of contribution (\$) 1/29/18 | Nancy Smith 500.00 100.00 Full name of contributor out-of-state PAC (ID#:___ Amount of contribution (\$) 1/24/18 Jim & Sue Barr Contributor address; 889 Elmwood Pr 500.00 Abilene , Tx 79605 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Gulde explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 5 Full name of contributor Mar K Spur Jock 4 Date 7 Amount of contribution (\$) 1/29/18 100.00 76 Glen Abby Abilene, Tx 79686 8 Principal occupation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID# Date Amount of contribution (\$) Gerald 1ChristieSmith 1129/18 Contributor address; City; State; Zip Code 5110.00 1802 Elmusod Abileno, Tx79605 Principal occupation / Job title (See Instructions) Full name of contributor Date Out of-state PAC (ID#:____ Amount of contribution (\$) Kelly McCerty Contributor address: City: State: Zip Code ** 5 Winged Foot-Cir. Abilene Tx 79606 Employer (See In 1000.00 Principal occupation / Job title (See Instructions Out-of-state PAC (ID#:_ Amount of contribution (\$) LUCI DUNN Contributor address: State; Zip Code 60.00 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule At 47
2 FILER NAME John. J. Rentz	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor Duti-of-state PAC (IDF) 1/29/2018 6 Contributor address: City: State: Zip Code 210 Hor bour Town Abilent TX 79606 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	7 Amount of contribution (\$) \$ 250.60
Phil and Many Christopher Contributor address: City: State: Zip Code 2102 Westminster Dr. Abilen, TX 79602 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Full name of contributor Date Bud Darby Contributor address: City: State: Zip Code P.O. Box 6229 Abilen .TX 791008 Employer (See Instructions)	Amount of contribution (\$) \$ 250.00
Date Full name of contributor	P 15.55
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE If contributor is out-of-state PAC, please see instruction quide for additional	

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
1 29 2016 Principal occur	5 Full name of contributor out-of-state PAC IDs Tim Dickenson 6 Contributor address: City: State: Zip Code 2017 Brookhaven St. Ab lea. TX 19605 pation / Job title (See Instructions) 9 Employer (See Instructions)	7 Amount of contribution (\$) \$\phi 250.00
	Full name of contributor Out of state PAC Ca Duane and Judy Miller Contributor address; City: State: Zip Code 1301 S. Legget DR. Abilene X 79605 Daton / Job Life (See Instructions) Employer (See Instructions)	Amount of contribution (\$)
100-	Full name of contributor Ken and Sul Burgess Contributor address: Coy. Educ: Zip Code 12 Cypress Point Abilene TX 79606 Dation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$) \$ 00.00
Date 1 29 26 8 Principal occup	Full name of contributor out-of-state PAC D Brad Kendnick Contributor address: City: State: Zip Code 950 North 1973 St. Ste 202, Abiley 77 79601 District / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (S) \$\frac{150.00}{1000}\$ ions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	

MONET	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
2 7 2018 8 Principal occur	5 Full name of contributor out-of-state PAC (10#	7 Amount of contribution (S) \$ 250.60
Date	Full name of contributor out-of-state PAC (IDe:	Amount of contribution (5)
2 7 208	Susie Cassle Contributor address: City: State: Zip Code 750 Grove St. Abilen TX 79605	\$500.00
	pation / Job title (See Instructions) Employer (See Instruc	(ions)
Date 2018	PO BOX 1600 Abilene TX 79604	Amount of contribution (S) \$ 100.00
Principal occup	ation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor Darrel Knight	Amount of contribution (\$)
2/7/2613	Contributor address: City: State, Zip Code 717 Polland Rd. Abilene TX 79602	4100.00
Principal occup	ation / Job title (See Instructions) Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE If contributor is out-of-state PAC, please see instruction guide for additional	

MONET	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz	3 Filer ID (Ethics Commission Filers)
2 7 2018	5 Full name of contributor aut-of-state PAC (IDF:) Vanessa Zientek 6 Contributor address: City: State: Zip Code 2333 Biltmore Abilene TX 79606	7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
2 7 2018	Roband Suzanne Starr Contributor address: City: State: Zip Code 18 King & Cross Abilene TX 79602	\$50.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ions)
	Full name of contributor [] out-of-state PAC (IDS) Tim Hatchett, Jr. Contributor address: City: State: Zip Code 725 Ballingu St. Abilene TX 79405 Dation / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (5) \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$
01.1200	Full name of contributor Goul-of-state PAC (IC) Alah and Linda Frizzell Contributor address: City: State: Zip Gode 1310 Canterbury Dr. Abilen X79602 Destion / Job title (See Instructions) Employer (See Instructions)	Amount of contribution (\$)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE If contributor is out-of-state PAC, please see instruction guide for additional	1

MONE	TARY POLITICAL CONTRI	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1 47
2 FILER NAME	John. J. Rentz		3 Filer ID (Ethics Commission Filers)
2/18/2018	5 Full name of contributor out-of-state PAC Jerry Zove 6 Contributor address City: State: 3259 Heritage Ln. Abilene	Tin Code	7 Amount of contribution (\$) \$ 250.60
8 Principal occu		9 Employer (See Instruct	ions)
2/18/2016	Full name of contributor Quil-of-state PAC Gary Young Contributor address City: State: 4518 Sierra Sunset Abilene	Zip Code TX 79606	Amount of contribution (\$) \$ 200.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ians)
	Full name of contributor 001-01-state PAC Gary and Mari Momison Contributor address; City: State: 1365 Elmwood Dr. Abilanc, action: Job title (See Instructions)	Zip Code TX 19405 Employer (See Instruction	Amount of contribution (\$) \$ 100.60
2/18/2018	George Tackson		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
E E	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NE	EDED
}	If contributor is out-of-state PAC, please see instru	uction guide for additional r	eporting requirements.

MONE	TARY POLITICAL CONTRIE	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule At: 47
2 FILER NAME	John. J. Rentz		3 Filer ID (Ethics Commission Filers)
2/19/2018 8 Principal occur	5 Full name of contributor out-ot-state PAC (2 Ary Dand Barbara Pith 6 Contributor address. City: State; 11 Turn berry Abilere TX pation / Job title (See Instructions)	ma 1 Zip Gode	7 Amount of contribution (\$) \$ 250.00
2110/2010	Full name of contributor out-of-state PAC B Robin and AVA Walker Contributor address: City: State: 140 Avenida Corkz Abilent Pation / Job Litle (See Instructions)	Zip Code X	Amount of contribution (\$) \$500.09
Principal occus	Full name of contributor Susan Pigeon Contributor address; City: State: Monarch Or. Abilen 7 Pation / Job bile (See Instructions)	1	Amount of contribution (\$) \$ 250.00
Date 2 19 2019 Principal occus	Larry and Shea Hall	Zip Code 79100 2. Employer (See Instruction	Amount of contribution (\$) \$500.00
	ATTACH ADDITIONAL COPIES OF If contributor is out-of-state PAC, please see instruc		

MONE	TARY POLITICAL CONTRI	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 47
2 FILER NAME	John. J. Rentz		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDS)		7 Amount of contribution (\$)
011012018	Mark Haynes 6 Contributor address: City: State 1941 Navajo Dr. Abilene.	7 79002	\$200.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ions)
Date	Bill Armer		Amount of contribution (\$)
2/18/2018	Contributor address; City: State 4348 S. 20th St. AbileN	Zip Code	\$ 25.00
Proposit service			
Ринора оссор	pation / Job Life (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor Out-of-state Pac Hugh and Brenda Sandifer	piDe	Amount of contribution (\$)
2/18/2018	Hugh and Brenda Sandifer Contributor address: Clty: State 3966 Bay Hill Dr. Abilene	Zip Code TX 79606	\$ 250.°°
Principal occuş	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor Out-of-state PAC Jack Mergele	(ICa	Amount of contribution (\$)
2/13/2618	Contributor address, City: State 2484 S. Willis St. Abilene TX		\$100.00
Principal occur	eation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES Of the contributor is out-of-state PAC, please see instru	· · · · · · · · · · · · · · · · · · ·	

Clayers St. Committee Co. Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this t	form.	1 Total pages Schedule At	47
FILER NAME John. J. Rentz		3 Filer ID (Ethics Commission	Filers)
Date 5 Full pame of contributor out-of-state PAC (18/18 6 Contributor address: City: State; 2325 Darvell Dive Ab, knc 7	Zip Code 7X 79606	7 Amount of contribution (\$)
Principal occupation / Job title (See Instructions)	9 Employer (See Instruct	ons)	·
Date Full name of contributor Ji Mmil & Skan Keeling Contributor address: City: State;	×	Amount of contribution (5	5)
1273 Lancelof Hollene 7, Principal occupation / Job title (See Instructions)	X 79602 Employer (See Instruct	• •	
11 Suc & Erick Schackmutt	Zip Code TX 79606	Amount of contribution (s	>)
Principal occupation / Job title (See Instructions)	Employer (See Instruc	ians)	
Date Full/name of contributor 201-01-state PAC Haviet Conner Contributor address: City; State: 2/09 liver Dahs Gy Abrene Principal occupation / Job title (See Instructions)		Amount of contribution (\$)
Principal occupation / Job title (See Instructions)	Employer (See Instruc	tions)	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule At-The Instruction Guide explains how to complete this form. 47 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 4 Date \$100.00 Principal occupation / Job title (See Instructions) aut-of-state PAC (ID#) Amount of contribution (\$) Date \$ 1000.00 Principal occupation / Job title (See Amount of contribution (\$) Date Principal occupation / Job title (See Instructions) Date Amount of contribution (S) out-al-state PAC (ID#) \$100.00

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 4 Date Principal occupation / Job title (See Instructions) out-of-state PAC (ID#) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (IDF) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Dout-of-state PAC (IDF) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 7 Amount of contribution (\$) \$100.00 8 Principal occupation / Job title (See Instructions) Full name of contributor Date ut-of-state PAC (ID#:____ Amount of contribution (\$) Dean and Lois Jameson Contributor address: City; State; Zip Code 3/26/18 1410 Tanslewood Dr. Abilere, Tx 79605 1410 Tanslewood Dr. Abilere, Tx 79605 Employer (See Instructions) Employer (See Instructions) \$25.00 Principal occupation / Job title (See Instructions) Date Full name of contributor Out-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID# Amount of contribution (\$) Contributor address: City; State: Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 1/9/2018 6 Amount (\$) Herrera 7 Payee address: City; State; Zip Code \$353.06 4109 Ridgement Dr. Abilene, Tx 79606 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. PURPOSE **OF** Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Food and Beverages Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Unique Signs
Payee address; City: State: Zip Code /16/20(8 Amount (\$) \$3,010.80 32 Buttercup Dr. Abilene, TX 79606 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. **PURPOSE** Advertising Expense Check if Austin, TX, officeholder living expense EXPENDITURE Yard Signs Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Date Pavee name Sally's Printing and Mail Service City; State; Zip Code 1942 B Industrial Blud. Abilene, TX 79602 \$1,212.72 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense Printing Expense EXPENDITURE Fundraising Letter Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking **Event Expense** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Transportation Equipment & Related Expense Consulting Expense Polling Expense Contributions/Donations Made By Printing Expense Travel Out Of District Legal Services Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 5 Payee name 6 Amount (\$) 7 Payee address; \$3,010.80 32 Buttercup Dr. Abilere, Tx 79606 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** 9 Complete ONLY If direct Candidate / Officeholder name Office held expenditure to benefit C/OH Unique Signs 2/5/2018 \$3,044.85 32 Buttercup Dr. Abilene, TX 79606 Check if travet outside of Texas, Complete Schedule T. PURPOSE Check If Austin, TX, officeholder living expense Advertising Expense EXPENDITURE Yard Signs Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Рауее пате Fucebook, Inc. Payee address; City; State; Zip Code Willow Road Menlo Park, CA 14025 \$1,017.18 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Advertising Expense Light Check if Austin, TX, officeholder fiving expense EXPENDITURE Facebook Ads Office sought Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Transportation Equipment & Related Expense Polling Expense Travel In District Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 2/20/2018 6 Amount (\$) 7 Payee address; City: State; Zip Code 1942 B Industrial Blud. Abilene, TX \$ 164,49 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF Printing Expense EXPENDITURE Thank You Letters Candidate / Officeholder name 9 Complete ONLY if direct Office held expenditure to benefit C/OH Payee name 3/1/2018 Sally's Printing and Mail Service ayee address; City: State; Zip Code \$103.54 1942 B Industrial Blud. Abilene, TX Check if travel outside of Texas. Complete Schedule T. PURPOSE OF Check if Austin, TX, officeholder living expense EXPENDITURE Printing Expense honk You Letters Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name Jack Rentz City; State; Zip Code \$8,660 Pinehurst Abilene, TX 79606 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense EXPENDITURE Reinbursement for political expanditue mode from personal funds on 12/27/2017 Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Office Overhead/Rental Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Printing Expense Travel Out Of District Legal Services Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME John J. Rentz 4 Date 5 Payee name Condley and Company LLP City; State; Zip Code 6 Amount (\$) 7 Payee address: 993 North 3dd Street Abilene, Tx \$ 2.000.00 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, afficeholder living expense Accounting / Banking EXPENDITURE Financial Statement 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 3/19/2018 Payee address; 2541 S. Trendaway \$884.95 Abilene, TX 79602 Check if travel outside of Texas, Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense OF EXPENDITURE Advertising Expense Bumper Stickers and Buttons Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Date Payee name Sally's Printing and Mail Service Payee address; City; State; Zip Code Amount (\$) B Industrial Blud. Abilene, Tx 79602 \$54.18 Category (See Categories listed at the top of this schedule) Description Check If travel outside of Texas, Complete Schedule T. PURPOSE OF Light Check if Austin, TX, officeholder tiving expense Printing Expense **EXPENDITURE** You Letters Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Fees Transportation Equipment & Related Expense Food/Beverage Expense Consultino Expense Polling Expense Travel to District Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Gilt/Awards/Memorials Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 3/19 5 Payee name 6 Amount (\$) 7 Payee address: 1601 Willow Road Mento Park, CA 94025 \$334,70 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense Advertising Expense EXPENDITURE ucebook Ads Candidate / Officeholder name 9 Complete ONLY if direct Office held expenditure to benefit C/OH 3/26/2018 ADV Consulting Amount (\$) Payee address: City: State: Zip Code \$8,703.56 P.O. Box 5975 Abilene, Tx 79608 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense Advertising Expense EXPENDITURE lelevision Ads Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Pavee name Date City: State: Zip Code 20th Abilene, TX 79605 \$1,082.50 Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense durtising Expense EXPENDITURE Complete ONLY if direct Candidate / Officeholder name Office held expenditure to benefit C/OH